



Parenting as a full time job: The experience of secular middle-class Jewish parents of transgender emerging adults in Israel

Yochay Nadan 

The Paul Baerwald School of Social Work and Social Welfare, The Hebrew University of Jerusalem, Jerusalem, Israel

ABSTRACT

Background: Emerging adulthood is a developmental period that encompasses individuals from their late teens through at least their mid-twenties, causing parents to be engaged in “parenting” activities longer than in the past. The present study aims to explore the parenting experience and its ascribed meaning among parents of trans emerging adults in Israel.

Method: Perceptions and perspectives of 18 Israeli parents of trans emerging adults regarding their parenting experiences were explored using in-depth, semi-structured interviews. All interviews were audiotaped, fully transcribed verbatim, and thematically analyzed.

Results: Analysis of the interviews yielded three main themes. The first pertains to parental worries; the second pertains to parental support practices, including accompanying and supporting their child in different arenas and serving as their companions and advocates; and the third pertains to parental coping skills.

Conclusion: Participants portrayed the parenting of trans emerging adults as a demanding, challenging, and complex experience which they described as a “full time job.” Their parenting experiences revolved around the tension between responding to the special needs of their trans children by helping them navigate this period of experimentation and exploration, and the need to give them autonomy and help them develop the independence they want and need. This tension should be understood in light of the specific situation and the stage of the child’s transition, the parent-child relationship, and the family situation, in addition to the wider societal context, which is often hostile and transphobic.

KEYWORDS

Emerging adulthood; Israel; parenting; parents; transgender

Introduction

In recent years, increasing scholarly and clinical attention has been paid to the experiences and challenges of parents of transgender (trans) children (e.g., Abreu et al., 2019; Field & Mattson, 2016; Malpas, 2011; Medico et al., 2020; Pullen Sansfaçon et al., 2020a). This article attempts to add to this growing body of knowledge by exploring the experiences and ascribed meanings of parents of trans emerging adults (between the ages of 18 and 26) in the specific context of Israel. It begins with a brief review of the concept of emerging adulthood, with a focus on the parenting of emerging adult trans children and a look at the Israeli context of gender diversity and parenting. It then turns to the methodology, the findings, and a discussion of the study.

Parenting emerging adults

Conceptualized by Jeffrey Arnett in the late 1990s, emerging adulthood is a developmental period that encompasses individuals from their late teens (beginning at approximately the age of 18) through at least their mid-twenties (Arnett, 2000). Arnett has argued that, in Western industrialized societies, the transition to adulthood has become so prolonged that it must be recognized as a new phase of the life course. Whereas people once transitioned from adolescence to young adulthood in their late teens or early twenties, when they chose a stable occupation, married, and had their first child, reaching adulthood today takes much longer, requiring recognition of a new phase of life between the end of adolescence and the beginning of young adulthood. Indeed, most

18–29 year olds (i.e., emerging adults) do not think of themselves as adults (Arnett, 2000, 2014). In Israel, developments in the socio-economic characteristics of young adults aged 18–34 between 1995 and 2011 indicate an overall delay in the onset of independent adult life. This delay is reflected in the older ages at which they begin their academic studies and enter the labor market, marry and have children, move out of their parents' homes, and purchase homes of their own (Fox, 2015). The conceptual and empirical evidence identifies the following five features that are more pronounced during emerging adulthood and that distinguish this period from adolescence, which precedes it, and young adulthood, which succeeds it (Arnett, 2000, 2014): 1) identity exploration; 2) instability; 3) self-focus; 4) feeling in-between; and 5) a sense of possibility and optimism. Arnett also argues that emerging adulthood is distinguished by independence from social roles and normative expectations. While this protracted passage to adulthood is considered normative, there is significant heterogeneity in its experience across social classes, races, ethnicities (Furstenberg, 2010), cultures (Mayseless & Keren, 2014), sexual orientations, and gender identities (Wagaman et al., 2016).

Emerging adulthood in the secular Jewish middle-class culture in Israel is characterized by a prolonged period of autonomous exploration, including, for example, long trips abroad, which are a customary phase in Israelis' transition from adolescence to adulthood (Scharf & Mayseless, 2010). Nevertheless, there are a number of unique occurrences that shape the experiences of these young adults. First, a large majority of the eighteen-year-old cohort of Jewish men and women leave their parents' home for a period of two to three years of mandatory service in the Israel Defence Forces (Scharf & Mayseless, 2011). Second, Israeli society places a high value on family and on belonging to a social group. The value of family has a long tradition in the Jewish way of life and the Jewish religion. Thus, although Israel is an industrialized society with largely individualistic values, it is more communal and more collectivist than the United States. Emerging Israeli adults tend to maintain close relationships and to consult with their parents and frequently

receive their assistance. This close relationship, however, is not associated with negative outcomes and has even evinced good relationships and positive outcomes (Scharf et al., 2005).

As a result of the changing nature of the transition to adulthood in industrialized societies, parents are engaged in "parenting" activities longer than in the past (Nelson et al., 2011). The "in-between" nature of this developmental period engenders a degree of uncertainty regarding the child's status as an adult and the role that parents should be playing in their child's life (Nelson et al., 2007). Indeed, many parents feel that they should still be helping their children navigate their lives, but that they should also be affording their children the independence and autonomy they want and need (Padilla-Walker et al., 2014). Thus, parents are tasked with the balancing act of remaining connected while gradually withdrawing support as their emerging adult gains autonomy. This difficult balancing act raises questions about parental authority and control during emerging adulthood, especially when parenting styles characterized by high levels of control and low levels of responsiveness have been linked to poor intra- and interpersonal outcomes (e.g., Padilla-Walker et al., 2014). Helicopter parenting is an example of a parenting style characterized by parents' over-involvement in the lives of their emerging-adult children, including behaviors such as solving problems and crises for children and intervening in matters vis-à-vis friends, professors, and employers (Nelson et al., 2015). One area in which the tension between support and autonomy is manifested is parental financial support, as financial ties can complicate the family dynamics embedded in the process of gaining self-sufficiency and trigger conflict between parents and emerging adults, most notably with regard to money (Lowe & Arnett, 2020; Renk et al., 2007).

It is important to recognize that the transition to adulthood is still frequently equated with cis-genderist and heteronormative milestones such as marriage and parenthood (Torkelson, 2012). However, LGBT individuals may enter the period of emerging adulthood differently than their cis-gender and heterosexual counterparts (Wagaman et al., 2016), as they face many legal, structural,

and social barriers (Nadal et al., 2016). The challenges faced by trans individuals are particularly extreme and include for example social marginalization (Jimenez, 2020), foregone health care (Clark et al., 2018), discrimination in employment (Tsfati & Nadan, 2020) and obstacles when trying to integrate into institutions of higher education (Seelman, 2016).

Parenting trans children

The experiences of parents of trans children and their pathways to parenting have received growing scholarly attention in recent years (e.g., Abreu et al., 2019; Field & Mattson, 2016; Malpas, 2011; Medico et al., 2020; Pullen Sansfaçon et al., 2020a). Studies on trans children have demonstrated the fundamental importance of affirming family environments for improving the mental health of gender diverse youth and fostering resilience (Olson et al., 2016; Sansfaçon et al., 2018; Simons et al., 2013). Although parental acceptance is a fundamental protective factor, a significant number of parents of trans children are not supportive, at least initially (Kosciw et al., 2018).

A recent systematic literature review (Abreu et al., 2019) of 32 studies explored the experiences of parents of trans and gender diverse children. Its analysis reveals the following types of parental experiences: (1) initial experiences, including taking note of atypical gender behavior resulting in diverse emotional reactions, cognitive dissonance, and behavioral avoidance; (2) transformation processes upon learning that they have a trans child, including seeking informative resources and developing cognitive flexibility, seeking support and making trans connections, facing barriers and isolation, developing an awareness of discrimination and building empathy, and acknowledging the situation's toll on mental health; (3) the positive aspects of having a trans child, including relational benefits, affirmation of values and activism, and new personal narratives; and (4) the various factors influencing the parents' process of learning they have a trans child, including time, gender, and attribution of the cause of trans identity (Abreu et al., 2019).

A recent 5-year qualitative study in Canada explored the experiences of trans children and youth (Pullen Sansfaçon et al., 2020b; Riggs et al., 2020), and those of their parents (Pullen Sansfaçon et al., 2020a). Based on interviews with 35 parents, it was found that, after their initial reaction to the coming out of their child, which ranged from surprise and disbelief to full acceptance and acknowledgement, most parents went through an extended process before fully accepting their child's gender identity. In terms of challenges, the researchers identified processes of loss and grieving, a struggle with the use of their child's new pronouns, and a lack of knowledge and information about trans identities and issues. As for elements facilitating the acceptance process, the researchers identified becoming educated on trans-related issues and accessing various sources of information as the most important elements in the eyes of parents. In addition, parents explained that being in online or real-life contact with other parents, attending support groups, and seeking professional support helped with the process of accepting their child's gender identity, and with the different steps of transition.

Situated in the context of Israeli society, the present study focuses on the parents of Israeli trans emerging adults. Trans persons pose a major challenge to the gender-binary perceptions that still dominate Israeli society, and this leads them to confront social values and norms and contributes to their construction as ultimate "others" suffering from social rejection, even within the semi-hegemonic Israeli LGBT community (Misgav, 2015). Therefore, in Israel, much like in other industrialized countries, trans emerging adults experience social discrimination manifested in exclusion from the job market (Goolding, 2020), difficulties assimilating into institutions of higher education (Tsfati & Nadan, 2020), and a lack of appropriate social and medical services for addressing their needs (Landau et al., 2020). Israel is a "child-oriented" society, and parenthood is viewed as a central part of Israeli adult identity and a major manifestation of adult normativity (Birenbaum-Carmeli, 2009). Children are highly valued by their parents, who usually make their needs a top priority. Children in Israel remain a main focus of concern for their parents

for a longer period of time than in most industrialized countries (Lahad et al., 2018). The present study aims to explore the parenting experience and its ascribed meaning among parents of trans emerging adults within the specific context of Israeli society.

Method

This study uses a modified constructivist grounded theory (CGT) approach to build a theoretical model grounded in data (Charmaz, 2014). The CGT approach views phenomena holistically, considering worldviews, meanings, and individual perceptions, as well as their connection to environmental contexts and broader interpersonal and social processes. CGT contextualizes the process and product of research in their historical, social, and situational conditions and assumes a more critical approach, striving to bare, dispute, and redress expressions of oppression, inequality, and injustice (Charmaz, 2014, 2017).

Participants

The participants were selected by means of purposeful, criteria-based sampling (Patton, 2015). The selection criteria was self-identification as the parent of a trans emerging adult between the ages of 18 and 26 (mean age: 21.26). Participants were recruited with the assistance of self-help organizations aimed at supporting young trans people and their parents. In total, 18 Jewish-Israeli parents – fifteen mothers and three fathers, all between the ages of 44 and 60 (mean age: 51.56) – of trans emerging adults were interviewed. Twelve of the participants had university education (three Ph.D.s, six MAs, and three BAs). The participants had varying numbers of children: twelve participants had two children; three participants had three children; and three participants had one child. All the participants were secular Jews, and all belonged to the middle or upper-middle class. The sampling was relatively diverse in terms of the ethnicity of the interviewees, half of whom were Ashkenazi Jews of European origin and the other half of whom were Sephardic Jews with roots in Arabic-speaking countries. Twelve of the

participants' children identified as transmasculine (assigned female at birth), five identified as transfeminine (assigned male at birth), and one identified as non-binary.

Data collection

Data was collected based on a semi-structured interview guide aimed at exploring and understanding interviewees' perspectives, worldviews, and experiences on the phenomenon under study. This was achieved by encouraging interviewees to provide extensive descriptions of their experiences, thoughts, emotions, and life events from both their intra- and inter-personal worlds (Patton, 2015). Interviews were conducted in 2019 by the author of this article and another researcher who assisted in data collection, both of whom are parents of minor children and identify as cisgender. The interviews were conducted in locations chosen by the participants and lasted one to two hours. In addition, participants completed a demographic questionnaire. The interview revolved around the following grand tour question (Spradley, 2016): "Can you share with me your experiences in parenting a trans child?" More specific interview questions covered the participants' hardships, hopes, and strengths, as well as the meanings they ascribed to their relationship with their trans child. These questions led the participants to disclose their experiences and to raise other topics spontaneously. All interviews were conducted in Hebrew, audiotaped, and fully transcribed verbatim. Quotes that appear in this article were translated into English by a professional translator.

Data analysis and trustworthiness

The analysis was based on the CGT stages (Charmaz, 2014): First, the researchers gained familiarity with the data (immersion) by reading the interviews a few times over. In the second stage, the researchers began the initial coding and identification of basic units of meaning (codes). Third, the researchers employed focused coding (using the most significant and frequent codes) to sort, synthesize, analyze, and conceptualize the data for the emergence of themes. Throughout

the analysis, at each stage, the researchers applied a comparative method (Glaser & Strauss, 2006) to establish analytical distinction and to conduct comparisons. The researchers analyzed the data individually and jointly; the comparison highlighted similarity between the two authors' analyses of the major themes, categories and sub-categories identified, helping establish inter-rater reliability (IRR) (Golafshani, 2003). The researchers then collected additional data for the purpose of checking and refining the emerging analytical categories. This was achieved through follow-up interviews with five participants, two additional key figures from the trans community, and two senior researchers (a specialist in gender studies and a specialist in cultural diversity and family therapy). All were given a draft report of the findings and were asked for their impressions of and comments on the analysis regarding key findings. The participants, key figures, and senior researchers verified our findings and proposed only minor adjustments. In the present study, trustworthiness was achieved by peer review with faculty colleagues, full transparency regarding all research processes, quotes from the participants, and follow-up interviews with the participants and key figures from the trans community in which key findings were presented and validated. An ongoing process of reflexivity, including the writing of a log, helped reduce the social asymmetries between researchers and participants (Ben-Ari & Enosh, 2011).

Ethical considerations

The research was conducted in accordance with ethical considerations related to the principles of informed consent, anonymity, and confidentiality, which served to ensure the ethical standards of the study. Ethical approval was granted by the Ethics Committee of the Hebrew University of Jerusalem's School of Social Work. The study was conducted in accordance with the committee's guidelines: participants signed an informed consent form and confidentiality was guaranteed throughout all stages of the study, including by the use of pseudonyms and the omission of all identifying information from this article.

Results

Analysis of the interviews yielded three main themes highlighting the experiences of parents of trans emerging adults. The first pertains to parental worries; the second pertains to parental support practices, including accompanying and supporting their child in different arenas and serving as their companions and advocates; and the third pertains to parental coping skills.

Parental worries

"You're always on alert, as a parent. It's like it never ends, for now. Maybe when he's 30. I don't know."

Worrying about their children was found to be a central experience for the parents interviewed. The parents, who spontaneously raised their worries in their narratives, differentiated between two distinct categories: 1) regular normative worries that are unrelated to the child's gender identity or transition, and 2) specific worries related to and derived from the child's trans identity. In the interviews, parents negotiated with themselves and with the interviewer over whether or not some of their worries were related to their child's gender identity and transition process, as reflected in the following words of Dana, the mother of a 26-year-old trans daughter:

Today I worry about her like I worry about any of my other children. How will she get by? Will she secure acceptance to the places she wants to get accepted to? Will she be successful in life? Will things be good for her? [This is] in addition to the fact that this is a community that suffers a great deal. The number of suicides she encounters... including one that was very, very close.

The above quote demonstrates the movement between general, non-trans-related worries, like those for "any other" emerging adult child, and specific worries regarding being part of the trans community, such as concerns about their being in close relationships with people who are suffering from mental health challenges. The more specific, "trans-related" worries are discussed below.

One major worry that parents mentioned was the fear that their children could be subjected to social rejection, bullying, and violence due to their otherness and vulnerability in a transphobic

society. This concern was articulated by Sharon, the mother of a 24-year-old trans man, as follows:

I pray that he'll be able to walk down the street safely. There are all kinds of sons of bitches, and he is different, and so some people think that it's easier to hurt him. As a result, I fear that they will hurt him and I pray that they don't.

In addition to the fear of their being subject to social rejection and violence, parents also talked about their children's strength and skills and their mental abilities and courage in coping with such threats, as explained by Hannah, mother of a 19-year-old trans son:

My greatest fear is that he will be hurt outside... by people who make comments that are hurtful... So that's my fear. I would say it is my greatest fear. I also know that he will cope. He's strong. He apparently has a very strong character, because you need emotional fortitude, you need to be truly genuine. How much courage you need!

Another major concern of parents was related to their children's loneliness, especially later in life, as reflected in the words of Sara, the mother of a 19-year-old trans son:

What do you think – that as a mother it doesn't pain me to think that my child may be alone for his entire life? Two weeks ago, I told him: "You'll stay with me all your life. As far as I am concerned, don't leave home. Find your job, get a dog. I will always build you your safe place... be with me until the day you die and the day I die.

Sara's words reflect her fear that her son will live a lonely adult life, as well as her desire for him, both now and in adulthood, to remain close to her, so she can serve as a maternal shield against this imagined future solitude.

Another major worry that was evident in the findings was the fear of the children's mental health challenges, as reflected in the words of Ella, the mother of a 26-year-old trans daughter:

There are cases of people who suffer from depression and all sorts of emotional difficulties and have no assistance. We know that our daughter went to all kinds of hospitals and to the emergency rooms of psychiatric hospitals to accompany [friends from the community]. I've grasped what a burden rests on

these people who assist one another. It's a great, great burden. And in this sense I worry. In all kinds of senses. Life has not been easy, but on the other hand, in the meantime, she is proving that she is getting along. She is a very strong woman.

Ella discusses her concern that her daughter is too close to and provides too much support for others in the trans community who are suffering from severe mental health issues. She also notes her daughter's strength and resilience in coping and supporting her trans friends. In light of the disturbing suicide rates in the trans community, many parents spoke explicitly about their fear that their children would commit suicide, as reflected in the words of Devorah, a mother of a 19-year-old boy:

Forty-one percent of the members of the community try to or have tried to commit suicide, and those on the other side are the ones who are supporting them... I was sometimes scared when he did not answer the phone or did not come home on time. I would get stressed out. I would immediately start thinking that he did something to himself or that something happened to him. How much can you live with that fear? It's horrible.

Devorah's words reflect the stress and exhaustion she experienced as a result of the immense anxiety she felt when her son did not come home on time, in light of the high suicide rate among members of the trans community.

Parental support practices

"Your child is your child, even when he is 200 [years old]. You accompany them through the processes."

One major theme that emerged from the analysis relates to the parents' support practices for their trans emerging adult children. A major dimension of this theme is parents *accompanying their children to medical procedures*, as reflected in the interview with Tamar, the mother of a 19-year-old boy:

I still go with him to every shot he gets. I still help him with the prescriptions... He asks, and I don't say no. It is still important to him, and he still asks me to come with him. He needs prescriptions, and I also go with him to the hospital. It helps him mentally that I go with him; he asks me to, and I do it. He does everything that's connected to the process

because he wants to. He asked me to not interfere because he would do everything himself, and he did everything himself.

Tamar distinguishes between specific areas in which her son is independent and other areas, such as medical treatment, in which her assistance is sought. Her words demonstrate her sensitivity and attentiveness to her son's psychological needs during the process. They also reflect the intensity of the experience of accompanying him ("to every shot") and the change over time ("it is *still* important to him").

Another major dimension is that of *economical support*. Parents described the ongoing, extremely high expense of supporting their children's transition process, including coverage of private mental health treatments, medical treatments (including private surgical and cosmetic procedures), and, in some cases, also higher education and rent. This dimension finds expression in the words of Gabby, the mother of a 25-year-old trans woman:

We support her financially. She is an expensive child. Tuition, rent, living expenses, and all the feminine maintenance...I needed to go through a process and to understand and connect with why it is right for her, and what was most helpful for me was understanding that this is not something she chose. The moment I understood that, then as far as I am concerned all the cosmetic surgical procedures, which [cost] thousands of shekels, are health [issues], and health is the responsibility of the parent, not the child. She asked for hair removal, shoes, clothing. Everything, everything was on me... For the most part everything was initially on me. I wanted her to look her best, and she also underwent private sex reassignment surgery [abroad]...It's not really cosmetic; they are life-saving treatments, but they are dealt with as aesthetic.

Like other parents interviewed, Gabby largely regarded medical, surgical, cosmetic, and psychological expenses as her own responsibility. She depicted her daughter's choice of her gender identity and transition, and the expensive treatments involved, not as a luxury but rather as a necessity. Parents of low socio-economic status have described the major struggle of economically supporting their children, often leaving them with little resources to meet their own needs.

Another major aspect of support pertains to the child's military service in the Israeli Defense Forces (IDF). Israel enforces compulsory military service for two years and eight months for men, and two years for women. In recent years, the IDF has begun recruiting trans people and has charged a special officer with responsibility for their accommodations, sometimes including separate washrooms and sleeping arrangements. The army refers to a soldier's gender according to how it is listed in the records of the Israeli Ministry of Interior at the time of conscription, and the length of service is determined accordingly. In cases where a soldier transitions during their service, the army adapts the terms of service to the soldier's new gender. As an alternative to the compulsory military service, young trans adults may engage in a unique trans-friendly civil service project. In line with the national ethos, some parents were very supportive of their children doing military service, as expressed by Ariel, a mother of a 19-year-old woman:

We really wanted her to enlist, and she did not want to. The army route is extremely formative. Of course, it is also a social contribution to society and to the country, but beyond that it really shapes personality. It means leaving the protection of your parents, going out into the wider world to learn how to manage a bit on your own...But she did not connect to this at all. She was quite frightened that she would not be able to survive in the army, that the army would not be able to contain her. But we did not give up; we thought about how it would be possible to integrate her into the army, and she maintained her approach and thought about how she could get released.

Ariel's words reflect the extensive efforts they made to integrate their daughter into the military, even against the will of their daughter herself, who clearly feared belonging to a "total institution" in which similarity is valued and promoted. In this case, parental support and efforts to have their daughter enlist stemmed from a desire to help her grow and develop her character. Furthermore, as serving in the army is a norm and an ethos in Israeli society, parental efforts can be viewed as practices of mainstreaming and normalizing their children.

In contrast, other parents discussed their efforts to assist their child in evading service,

either before their enlistment or in the midst of their service. This approach is reflected in the following quote from Mary, the mother of a 26-year-old son:

After about a year in the army, there was intense and severe harassment against him, including physical violence, to the point that I intervened and snatched him out of the army. We just snatched him out of there with the help of some military psychiatrist...He had homophobic and transphobic commanders...It was a total horror, including blows, throwing his things out of his room. It was disgraceful behavior. They were discharged from the IDF, but I said that I would not leave him there.

Mary's words reflect her protective role and deep involvement in the process of ending her son's military service as a result of extreme bullying and violence.

In addition to their practices of extensive parental support, the parents also addressed the tension between the need to support their trans emerging adult children on the one hand, and the need to let go and begin encouraging the child's separation and independence on the other. Adar, the mother of a 19-year-old boy, reflected on this tension:

[Sometimes] I say, enough. I already have a 19 year old son. I'm already supposed to be somewhere else. And I'm not...I'm still very focused on him. And this is the case with many of our children, a very protective parenting, too protective if you ask me. But, you know, it's because of their fragility and that horrible fear. So, I don't know if it's good, but it just happens. Because they don't dare to do a lot of things on their own. They don't make phone calls until their voice changes. So, you have to do it for them, because you really understand it...As a mother, the amounts get lost – of how much to challenge them and how much not too. Like, how to do it so that it doesn't harm their mental health.

Adar's words are reflective of her negotiations between two positions: the special need for parental support and companionship in everyday matters due to the child's sensitivity and fragility and parental concern, and the desire to avoid parental overprotection that could prevent the child from developing and becoming independent.

Parental coping skills

"I have a social support network that is really made up of friends, of a spouse, with whom it is easy to go through it".

A major element which parents described as helping them cope with being parents of trans emerging adults was therapy, whether individual therapy, couple therapy, or family therapy. Some spoke of therapy as a necessity: *"It's hard to ask for help, but every family with a transgender child must undergo family therapy in order to strengthen family unity."* Parents also discussed the obstacles they faced when seeking out trans-friendly therapists. Once a good therapist was found, therapy was perceived as a means of working on their own acceptance, improving their relationship with their trans child, and accompanying their child during the transition into adulthood, as described by Esther, the mother of a 19-year-old woman:

There was also a private psychologist whom we contacted. But she was not from this field at all and did not understand it ... Our daughter started to take hormones, and we wanted psychological consultation in order to provide us with a tailwind; we also wanted someone to mediate between us and our daughter...and we found such a therapist – of course, in a private practice. She helped us a great deal, and she has been counseling us for a long time already. She is from the community and she knows the field ... She showed us other layers of coping, things we had not noticed regarding our daughter.

Another element which parents identified as helping them cope in their parental journey was membership in a support group – either a self-help peer group or a group facilitated by a professional. According to the parents, the major contribution of the groups was their influence on parents' sense of belonging, as described by Adar, the mother of a 19-year-old boy:

I remember that a few months after that I felt terribly alone, I attended support groups for parents of trans people...It really, really helped me. My husband did not come. And I felt like I belonged there. I think it also really helped the atmosphere here [at home]. That is to say, I was much better able to truly accept things – to understand what it means, to understand what was required, to be there for him. To understand that no matter how difficult it is for me, it's a thousand times more difficult for him.

In addition to the significance of this sense of belonging, membership in a support group facilitated the process of acceptance, including feeling

empathy for her son's journey, which led to improvement in the family relationships. Other parents talked about the groups' psycho-educational elements as enhancing their coping skills, as described by Ariel, the mother of a 19-year-old woman:

[The facilitator] provided us with tools for how to tell our surroundings and how to tell the family, and how it looks to society. Taking leave of the child who was, and the understanding that at heart the child is still the same, despite the change in gender. We saw that there were people who we could get help from. We were talking about the fact that what we knew at the beginning, and here we saw regular people having the same experiences – that it was happening to them too. They are regular people like us who are experiencing the same thing.

Some of the mothers, who belonged to a tight knit support group of mothers of trans kids, described the group as a major source of knowledge transmitted by “experts by experience” – including medical knowledge and networking, as described by Abigail, the mother of a 19-year-old son:

All the women in the group understood. They told me what to do and who to contact, and they provided me with the names of doctors. I knew what to expect. I received recommendations for doctors and instructions and explanations regarding the operation ... They were by my side every step I took. It was very, very meaningful; it was significant assistance. Today, I no longer have such an acute need for assistance because I'm already passed the major trauma.

The final element that was identified by parents as meaningful in their own coping was their own activism, as reflected in the words of Leah, the mother of a 25-year-old trans woman:

That situation – of being a mother to a trans girl – turns you into the child's envoy. You are his envoy to the entire world. You fight your child's war against the world, and this generates activism, because you cannot leave your child alone in this system. It's hard enough to walk this path alone, and then you are walking with your child and trying to create a better world for him.

Leah described her journey to becoming a trans rights activist. Becoming an agent of change, especially within a group of parents, appears to be a source of strength and resilience for parents in that it facilitates a process of assigning

meaning to their experiences. Another means of creating meaning, described by the father of a 19-year-old boy, was a journey of poetry writing that was part of his personal process of working through the transition and the derived challenges.

I wrote all the time...but no one saw, with the exception of one friend ... My son wanted to see the poems. I brought him all the poems... and he phoned me that evening and said: “Dad, I wept. You have to publish the book for other boys and girls, for other parents”...And that's what I did.

Writing poetry initially served as a personal tool for processing, but sharing the poems with his son facilitated empathy and closeness, which, in turn, resulted in the father's decision to go public for other trans children and their parents. This demonstrates how personal processes lead to interpersonal and societal change, and the manner in which these three dimensions serve to shape one another other.

Discussion

This study explored the parenting experiences and ascribed meaning of parents of Israeli trans emerging adults between the ages of 18 and 26. When employing the theory of emerging adulthood (Arnett, 2000, 2007) to the study's findings, it becomes evident that the parents interviewed are negotiating their parental role in their child's life. Parents wish to support their children and to help them navigate this period of experimentation and exploration, as well as to provide them with the autonomy and assistance necessary to develop the independence they want and need (Nelson et al., 2011; Padilla-Walker et al., 2014). The findings demonstrate that the parents who were interviewed tended to be more on the support and assistance side of the continuum than on the side of developing autonomy. This is manifested by the various support practices employed by parents, including accompanying the child in different contexts, such as medical procedures; economic support; and advocating for them vis-à-vis bureaucratic systems such as the military. Our findings support previous findings regarding the extremely positive impact of parental support practices on the well-being and mental health of trans children and youth, as well as on their

parents' journey to understanding and acceptance (Pullen Sansfaçon et al., 2020a; Riggs et al., 2020). However, our findings demonstrate that in emerging adulthood, this dynamic creates tension for parents – between the need to support and protect their trans emerging adult child and the need to let go and to help the child develop their capacity for separation, autonomy, and independence. Israeli emerging adults' close socio-normative relationship with their parents, including consulting with them and receiving their assistance (Scharf et al., 2005), may have intensified this tension for the parents interviewed.

Our findings indicate that from the perspective of the parents interviewed, close child-parent relationships that include the receipt of ongoing parental support – in some cases on a daily basis – seem to be a source of stress for parents. Being so close and privy to the child's hardships, mental health challenges, suffering, and loneliness may generate worries and even anxiety in parents (Medico et al., 2020; Pullen Sansfaçon et al., 2015). Similar to previous studies (Gray et al., 2016; Pullen Sansfaçon et al., 2020a), our findings indicate that one major worry of parents in our study was that their child would be subjected to social rejection and violence, which can be understood as related to societal transphobia and to violence in Israel (Goolding, 2020; Pizmony-Levy & Kosciw, 2016). Moreover, parents demonstrated substantial concern regarding suicide ideation and suicide attempts by their child, as well as their exposure to other community members who are suicidal. This can be understood in light of the extremely high rates of suicidal ideation and attempts among trans people (Thoma et al., 2019), half (48%) of whom, in Israel, have reported at least one suicide attempt in the course of their lifetime (Goolding, 2020). In light of these substantial concerns, parental attempts to protect their children are well understood. Parents fear that providing their trans emerging adult children with autonomy and independence may increase their vulnerability.

The close and intimate relationships between Israeli parents and their emerging-adult children are enhanced during the latter's compulsory army service (Scharf & Mayseless, 2011), which paradoxically leads to a more involved parenthood

and delays Israeli young adults' separation from their parents (Lavee & Katz, 2003). From this perspective, the study participants' experiences are similar to those of other Israeli parents of emerging adults and highlight the influence of contextual factors. Their experiences articulate the family-centered ideology that views family as the central axis of social life and a site of constructing one's identity (Donath, 2015; Scharf et al., 2005).

As for clinical implications, it appears to be of the utmost importance to be able to pay attention to, and to discuss with the family, the dialectic relationship between the parental role of supporting a trans child and helping them navigate this period of exploration, and allowing the child the autonomy they need to be more independent. Parental "over protection," which should not be assumed to be pathological, invites an open discussion of parental worries and concerns. Moreover, it is also extremely important to explore parental coping skills including sense of belonging, parental agency, and small acts of resistance and activism. Another implication pertains to the importance of encouraging parents to join informal social support groups in which they can feel socially accepted, supported and empowered.

Before concluding, it is necessary to note the limitations of this study. First, the fact that it is based on a relatively small and homogeneous sample that is Jewish, secular, middle class, and relatively educated limits the transferability of its findings and interpretations. Second, the fact that the analysis engages the parents of trans emerging adults in a specific social and cultural context limits its findings to the Israeli context, though certain aspects may also be applied to other contexts. A third limitation stems from the fact that the participants were recruited with the assistance of self-help organizations that aim to support young trans people and their parents, which may have helped shape the accounts of the participants. These limitations highlight the need for future research on parents of trans emerging adults in different contexts using broader samples, in an effort to generate a better understanding of the phenomenon and to increase the transferability of findings and interpretations.

Conclusion

Participants portrayed the parenting of trans emerging adults as a demanding, challenging, and complex experience which they described as a “full time job.” Their parenting experiences involved concern for their trans emerging adult child, parental support practices such as accompanying their child in different contexts and assisting them with bureaucracy and finances, and developing parental coping skills. Their parenting experiences revolved around the tension between responding to the special needs of their trans children by helping them navigate this period of experimentation and exploration, and the need to give them autonomy and help them develop the independence they want and need. These tensions should be viewed and understood in light of the specific situation and the stage of the child’s transition, the parent-child relationship, and the family situation, in addition to the wider societal context, which is often hostile and transphobic.

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Declaration of conflict of interest

The author declares that he has no conflict of interest.

ORCID

Yochay Nadan  <http://orcid.org/0000-0001-6797-3454>

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